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APPLICATION NO.	FILING DATE	FIRST NAMED I	NVENTOR	ATTORNEY DOCK	KET NO.	CONFIRMATION NO.
10/814,260	4/1/2004	Barry W. Tov	vnsend	183.39735PA6		6963
TITLE OF INVENTION: PRO	STHETIC FOOT WITH TO	JNABLE PERFORMAN	ICE			
APPL. TYPE SMALL ENT	ITY   ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PA	ID ISSUE FEE TOT	AL FEE (\$) DUI	E DATE DUE
Nonprovisional NO	\$755	\$300	\$0		\$1055	09/17/2009
EXAMINE	ER	ART UNIT	CLASS-SUBCLASS			
BLANCO, JA	BLANCO, JAVIER G 3774 62		623	-053000		
Change of correspondence addrest FR 1.363).  Change of correspondence address form PTO/SB/122 attached. agents OR, alternatively  "Fee Address" indication (or "FTO/SB/47; Rev 03-02 or more recent) umber is required.	ddress (or Change of Corresponde 7, Fee Address" Indication form	ence	(1) the names of up Or agents OR, al (2) the name of s member a regist and the names of	he patent front page, list to 3 registered patent attorne ternatively, single firm (having as a ered attorney or agent) f up to 2 registered pater nts. If no name is listed	& KRAU	IS, LLP.
ASSIGNEE NAME AND RESIDEN	ICE DATA TO BE PRINTED ON T		attorneys or age	nts. If no name is listen i	io name win u	e printeu.
PLEASE NOTE: Unless an assigne 37 CFR 3.11. Completion of this for	e is identified below, no assignee m is NOT a substitute for filing an	assignment.		ntified below, the document has STATE OR COUNTRY)	s been filed for red	cordation as set forth in
(A) NAME OF ASSIGNEE				STATE OR COUNTRY)		
Bioquest Prosthetics	s, LLC	Dak	ersfield, CA			
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Authorized Signature /RON	ald J. Shore/ R/A	/	Date: Septe	ember 17, 2009		
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